

Demonstration Projects for State and Local Health Departments: HIV Rapid Testing to Improve Outcomes for Partner Counseling, Testing, and Referral Services (PCTRS)





Overview

Strategies 2 and 3 of the Advancing HIV Prevention Initiative focus on the implementation of new models for diagnosing HIV infections and testing those who are known to have had potentially infectious contact with HIV-positive partners. Most jurisdictions currently offer partner counseling, testing, and referral services (PCTRS), through which partners are identified, counseled, and referred, but often clients do not follow through with testing. The recently approved OraQuick® rapid test, suitable for point-of-care use in field conditions, presents the opportunity to increase the number of completed tests as part of partner notification programs.

Six health departments were awarded 2-year contracts totaling \$2.7 million to conduct demonstration projects that use HIV rapid testing to improve PCTRS outcomes. PCTRS provides an opportunity for HIV-infected persons to notify their sex or drug using partners of exposure to HIV. After locating and informing current and past sex or injection drug using partners of their exposure to HIV, disease investigation specialists (DISs) will use a variety of PCTRS models to offer HIV counseling and testing to affected partners.

Goals

The goals of this project are to demonstrate

- the feasibility of conducting rapid HIV testing within field-based PCTRS,
- alternative approaches to traditional PCTRS,
- the increased yield of contacts using continuous PCTRS for HIV-infected persons who continue to use injection drugs or be sexually active, and
- effective linkages of persons diagnosed with HIV through PCTRS to medical evaluation, treatment, prevention, and other appropriate services.

Collaborator Projects

Colorado's project is a statewide program offering standard PCTRS. Colorado is adding the rapid test, which it will administer at health departments as well as in clients' homes and cars—wherever clients feel most comfortable. The project will focus on care for HIV-positive partners, and will also expand its reach by looking at social networks of HIV-positive clients.

Chicago is offering expanded PCTRS, involving 10–15 community-based organizations (CBOs), as well as 10 of its 39 DISs. Chicago's project will offer the rapid test to anyone who requests it at a participating CBO. When someone tests positive, a DIS will go out into the field, locate the partners, and test them. The project will also use DISs at other clinics (e.g., STD clinics) to help identify partners of those who test positive for HIV in the clinics.

Los Angeles' program is similar to Chicago's. Los Angeles will work with CBOs (The LA Gay and Lesbian Center, The AIDS Healthcare Foundation, and LA Shanti) to offer rapid testing. PCTRS liaisons will use two avenues to recruit clients: psychosocial-based services and medical services. The PCTRS liaisons will act as DISs based at the CBOs.

Louisiana will offer traditional PCTRS. Two DISs have been hired specifically for this project and will be based in Baton Rouge and New Orleans. Louisiana will offer rapid testing and has identified the summer heat as one of its challenges to testing in the field.

San Francisco is very different from the other sites in the project. San Francisco has historically had a low acceptance of PCTRS. As part of this demonstration project, San Francisco is producing flyers and brochures and providing training to spread the word about PCTRS. Services are being offered in two ways:

- Traditional PCTRS is still offered at the San Francisco City Clinic, in which DISs go
 out into the community to locate and test partners of HIV-positive clients.
- The partner disclosure assistance program (PDAP) is a client-centered approach that encourages persons who are HIV-positive to contact current or past partners, either in person or via the Internet, and conduct PCTRS themselves. Clients are given the tools they need, including form letters and testing cards for the partners, which can be used for free rapid HIV tests.

Wisconsin will offer traditional PCTRS in most of the state. Not every city will have a DIS, but those without these specialists will use the services of DISs in nearby cities.

Project Milestones

• Funding announcement: April 2003

• Selection of contractors: July 2003

• Investigator meetings: November 2003

• Rapid test implementation: April 2004 for most sites

• Site visits: November 2003 – February 2004 for implementation site visits; other site visits will be planned as needed.

Data Collection

The project will use CDC-supplied data forms to collect quantitative data on both index clients and partners. Currently, these are hard copy forms; an Access-based form is under development and will soon be provided to the sites, along with laptops for data entry in the field. Qualitative data will be collected from health departments and DISs through focus groups and follow-up interviews with clients who have been served.

Results to Date

PCTRS sites began testing in May 2004. Although only limited quantitative data have been generated, invaluable information regarding operational issues and how best to develop and implement similar programs has been gathered through meetings, one-on-one discussions with sites, and site visits. This type of information is particularly useful because one of the primary goals of these demonstration projects is to develop guidelines of best practices for use by other health departments interested in implementing similar projects.